PART B - FEE(S) TRANSMITTAL

Attorney Docket No. 337348059US &

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maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 25096 7590 06/02/2005 PERKINS COIE LLP Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. AUG 9 1 2005 PATENT-SEA P.O. BOX 1247 SEATTLE, WA 98111-1247 (Denositor's name Stefan Klinkowski 09/06/2005 SSITHIB2 00000058 10622898 01 FC:2501 700.00 OP 02 FC:8001 (Date 6.00 OP ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 33734-8059US 2827 07/17/2003 Bradford Evan Gline 10/622,898 TITLE OF INVENTION: METHODS FOR TREATING ESSENTIAL TREMOR DATE DUE **PUBLICATION FEE** TOTAL FEE(S) DUE SMALL ENTITY ISSUE FEE APPLN. TYPE \$700 09/02/2005 YES \$700 \$0 nonprovisional EXAMINER ART UNIT **CLASS-SUBCLASS** 607-045000 LAYNO, CARL HERNANDZ 3762 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Perkins Coie LLP 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Northstar Neuroscience, Inc. Seattle, Washington Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🔀 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: A check in the amount of the fee(s) is enclosed. Issue Fee Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0665 (enclose an extra copy of this form). Advance Order - # of Copies _ Deposit Account Number 5. Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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